POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	1:-25-0
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>C</i> 3		, ,
	P		12/04/00

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	Date	Claim	Date	Claim	Date
- 3 ×					
Final Driginal		Final		Final Original	
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A NA	<u> </u>	58		108	
6 9 14		59		109	
7 10 7		60		110	
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42 43	<del>- - - - - - - - - - - - - - - - - - - </del>	92		142	<del></del>
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46	<del></del>	96		146	++++++
47	╅	97		147	<del>+                                    </del>
48	<del></del>	98	<del></del>	148	╅
49	<del></del>	99	<del>- - - - - - </del>	149	<del>                                     </del>
50		100	<del>-   -   -   -   -   -   -   -  </del>	150	<del></del>

If more than 150 claims or 10 actions staple additional sheet here

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